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ABSTRACT

The purpose of the research was to investigate the effectiveness of three pilot courses entitled "The Development and Early Education of the Mentally Handicapped Child," which were offered specifically for personnel in day services centers for the mentally handicapped in rural Wisconsin. Pre- and post-tests were administered to the students covering the cognitive and affective content specified in the course outline. They also reported the extent to which their personal objectives were met in the course. The readability of the text books and other resources used was determined. Among the recommendations were that a "circuit rider" approach be used to accommodate students in rural areas unable to travel a great deal, that high school reading levels be included in new text books and course materials, and that there is need for continued emphasis on early childhood education and behavior management. Findings specifically related to the pilot courses indicate that the students were satisfied in accomplishing their personal objectives with the course content but that too much material was included. Revision and dissemination to other rural areas of the State is recommended. All data gathered and analyzed is presented tabularly with narrative interpretation. Appendixes include the course outline, student survey forms, pre- and post-tests, and consultant resource recommendations. (MS)

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FINAL REPORT

PROJECT NO. 19-025-151-223

AN EVALUATION OF THREE PILOT COURSES: THE DEVELOPMENT AND EARLY EDUCATION OF THE MENTALLY HANDICAPPED CHILD

JUNE, 1973

WISCONSIN BOARD OF VOCATIONAL, TECHNICAL,
AND ADULT EDUCATION
MADISON, WISCONSIN

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AN EVALUATION OF THREE PILOT COURSES: THE DEVELOPMENT AND EARLY EDUCATION OF THE MENTALLY HANDICAPPED CHILD

by

JANICE M. KEIL

UNIVERSITY OF WISCONSIN-STOUT
MENOMONIE, WISCONSIN

JUNE, 1973

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June 30, 1973

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SUMMARY

The purpose of this research was to investigate the effectiveness of three pilot courses entitled The Development and Early Education of the Mentally Handicapped Child, which were offered specifically for personnel in day services' centers for the mentally handicapped in rural Wisconsin.

Pre- and post-tests were administered to the students covering the cognitive and affective content specified in the course outline which was developed by the Division of Mental Hygiene of the Department of Health and Social Services of the State of Wisconsin and the Wisconsin Board of Vocational, Technical, and Adult Education. Students also accomplished forms in which they evaluated the extent to which their personal objectives were met in the course and the extent to which they felt the specified course content was covered. In addition, the readability of the textbooks and other resources recommended for or actual utilized in the course were determined. Faculty and consultants for the pilot courses submitted comments, recommendations, and other information pertaining to the effective implementation of the courses.

The following are the major conclusions and recommendations of this study:

1. In view of the fact that twenty of the thirty-four day services students in the three pilot programs were married women with children of their own, it would appear that there continues to be a need for courses of this nature located at centers which do not require a great deal of travel on the part of the students. It is recommended that the VTAE districts consider a "circuit rider" approach to serving the needs of many students in rural areas.

2. The varied educational backgrounds of the students enrolled in the pilot courses would seem to indicate the need for the careful selection of reading materials. It is recommended that references with high school reading levels be included in the course readings as well as some references for more advanced students.

3. The day services students' general lack of professional courses or experiences in the areas of early childhood education and behavior management would seem to indicate the need for the continued emphasis of these areas in courses of this nature.

4. The students in the three pilot courses were satisfied that the pilot courses had been satisfactory or better in helping them accomplish their personal objectives for the courses. It is recommended that students in courses of this nature be asked to specify personal objectives within the framework of the designated topics.

5. Based on the fact that the students in the three pilot courses indicated that 77%, 82%, and 77% of the course outline content had been covered in a satisfactory or better fashion, it is concluded that the course content and experiences were well presented in the three pilot courses.

6. The comments of many of the students and staff would seem to indicate that the courses were expected to cover far too much material. Therefore, it is recommended that the VTAE schools revise the course outline and eliminate the content which is not essential. This will be particularly important if the course is also expected to help meet the individual objectives of the students.

7. Although only a 5% average test score increase was noted between the pre-and post-test scores, there were many course topics on which much larger percentage increases were attained. Because of the vast amount of material to be covered and the fact that some topics in each pilot course were not covered at all, the average 5% increase was not surprising. It is recommended that each center note the areas in which their students did not make significant test score increases and concentrate on improving the coverage of these topics in future offerings of the course.

8. Based on the readability levels of the text books recommended in the course outline and the educational backgrounds of the day services students, it is highly recommended that new text books and readings be selected. Recommendations of other resources have been suggested by consultants to the three programs. Their recommendations are presented in Appendix D of this report.

9. Based on faculty and consultant suggestions, it is recommended that: a) the results of this study be utilized in revising the course outline in terms of reducing the content to be covered and revising the references and resources to be utilized; and b) consideration be given to advertizing both the Young Child I and The Development and Early Education of the Mentally Handicapped Child courses and running them concurrently so that staff and resources may be utilized most efficiently and effectively.

10. The results of this research seem to indicate that the course The Development and Early Education of the Mentally Handicapped Child can be implemented successfully by VTAE districts with the use of consultant personnel. Therefore, it is recommended that the revised course (when completed) be disseminated to other areas (particularly rural) of the state.

CHAPTER I

INTRODUCTION

According to Wisconsin law, any day care center which serves four or more children under age seven must be licensed. The educational and other licensing requirements are specified in the manual Rules of Licensing Day Care Centers of Children in Wisconsin, which was published by the Voluntary Agencies Services, Department of Health and Social Services in March 1971. Since that time the Vocational, Technical, and Adult Education districts have offered a course entitled The Young Child I to assist day care and day services staff in meeting the educational licensing requirement that specifies that all staff who have the primary responsibility for the children must have a 40 hour course pertaining to the growth and development of young children.

The content of the Young Child I course has been devoted primarily to the growth, development, and care of the normal child. Consequently, faculty and staff of the day services centers for mentally handicapped children requested that the Vocational Technical and Adult Education districts offer an alternative to the Young Child I course which would meet the needs of personnel working in centers which provide services to young mentally handicapped children.

Subsequently, the Division of Mental Hygiene of the Wisconsin Department of Health and Social Services, in cooperation with personnel from various state agencies and the Wisconsin Board of Vocational, Technical and Adult Education, developed a course outline entitled The Development and Early Education of the Mentally Handicapped Child. A copy of this outline is presented in Appendix A of this report.

In September, 1972 personnel of the Division of Family Services, the Division of Mental Hygiene, the Vocational, Technical, and Adult Education districts, and the University of Wisconsin-Stout met with Miss Christine Nickel concerning the implementation and evaluation of pilot offerings of the aforementioned course which was proposed as an alternative to the Young Child I for personnel in day services centers for the mentally handicapped. At the meeting it was suggested that three pilot offerings of The Development and Early Education of the Mentally Handicapped Child be offered by the VTAE in Green Bay, Stevens Point, and Eau Claire in the winter and spring of the 1972-73 school year. Teachers of each of the three courses were to be encouraged to experiment with a variety of ways of implementing the course. It was

also proposed that early childhood staff of the University of Wisconsin-Stout, with experience with young mentally handicapped children, be requested to evaluate the effectiveness of these pilot offerings in: a) meeting the objectives of the course as specified by the Division of Mental Hygiene, and b) meeting the needs of the individuals enrolled in the course. The research reported herein is the result of these evaluations.

CHAPTER II

METHODOLOGY AND PROCEDURES

One of the questions which was raised concerning the course dealt with the characteristics of the personnel in day services centers. It was felt that background information and statements of the educational needs of the students who enrolled in the three pilot courses would assist the teachers in the various VTAE districts in planning and selecting appropriate content, readings, and experiences for the day services personnel in the courses and those who might enroll in the courses in the future. Additionally, it was felt that the students enrolled in the pilot courses should evaluate the extent to which they felt the proposed course content was covered and the extent to which their needs were met by the courses.

A survey form entitled The Early Education of the Mentally Handicapped Child: Survey of Students' Backgrounds was developed and administered to all of the students in the three pilot courses who were present at the first meeting. A copy of this form is presented in Appendix B.

A second survey form entitled The Early Education of the Mentally Handicapped Child: Survey of Students' Needs was developed and administered to all persons present at the first meeting of the three pilot courses. This questionnaire requested that each student list five objectives describing what he/she would like to learn in the course. A copy of this form is presented in Appendix B.

After the courses were concluded each student was asked to evaluate the extent to which he/she felt his/her objectives were met in the course. The form utilized in reporting this information was entitled Survey of Students Who Participated in the VTAE Course Entitled The Development and Early Education of the Mentally Handicapped Child, and a copy is presented in Appendix B.

In order to determine the extent to which the students acquired knowledge related to the affective and cognitive content delineated in the course outline, a 200 item test was developed which covered the content specified. The test was administered to the students who were present at the first and last class sessions of the pilot courses. A copy of the test is presented in Appendix C.

It was originally proposed that the readability of all books, articles, and references be determined. However, since

several of the instructors utilized their own references and were asked to select new ones after the courses had been completed, it was decided that it would be helpful to know the readability of many of these resources. Therefore, the Flesch method of determining the reading level of printed materials was utilized in evaluating many proposed sources in addition to those suggested.

Although it was not proposed in the grant proposal, it was decided that the personnel who coordinated or taught the pilot courses should make suggestions as to the types of resources and procedures they would suggest for future offerings of the course. Consequently, each staff member involved was asked to submit a detailed list of proposed suggestions. In addition, the resource people met after the courses were concluded to pool their comments, suggestions, and evaluations.

All of the data gathered through the aforementioned procedures were analyzed using the appropriate statistical and/or other research procedures. These analyses and the findings are presented in the following chapter.

CHAPTER III

FINDINGS AND ANALYSES

The findings and analyses of this research project are reported under the following topic headings: a) Descriptive Data Concerning the Backgrounds of the Students Enrolled in the Three Pilot Courses; b) Extent to Which Students in the Three Pilot Courses Felt Their Objectives for the Courses Were Met; c) Extent to Which Students Felt the Content Areas Were Covered in the Three Pilot Courses; d) Pre- and Post-Test Scores of the Students in the Three Pilot Courses; e) Readability of the Texts and Other Readings Utilized in or Recommended for the Course; and f) Faculty and Consultant Evaluations of the Three Pilot Courses and the Proposed Course Outline.

Descriptive Data Concerning the Backgrounds of the Students Enrolled in the Three Pilot Courses

Eau Claire Pilot Course. Seven students were present at the first class session and completed the survey form pertaining to their educational and personal backgrounds. A summary of this data is presented in Table 1.

The information indicates that the students had a wide variety of educational backgrounds and that only two of the seven had had workshops or courses related to early childhood education and behavior management.

Green Bay Pilot Course. Seven of the eight students who were present at the first class session were employed by day services programs. They completed the survey form pertaining to their educational and personal backgrounds. A summary of this data is presented in Table 2.

The information indicates that the students performed a variety of center functions and had educational backgrounds ranging from high school through a bachelor's degree. Only one of the seven had had courses or workshops related to behavior management. Three of the seven had had courses or workshops related to early childhood education.

Stevens Point Pilot Course. Twenty of the twenty-five students who were present at the first session were associated with day services centers. They completed the survey form

TABLE 1

SUMMARY OF THE BACKGROUNDS OF THE STUDENTS
IN THE EAU CLAIRE PILOT COURSE

Subject Number	Sex (M, F)	Marital Status*	No. of Children	Day Services Position					Educational Background						No. of Courses or Workshops - Child Development	No. of Courses or Workshops - Early Childhood Education	No. of Courses or Workshops - Mentally Hand.	No. of Courses or Workshops - Behavior Mgt.	Yrs. Experience Working with Children
				Administrator	Teacher	Aide	Home Trainer	Other	High School	Vocational School	B.S. or B.A.	M.S. or M.A.	Ph.D. or Ed.D	Other					
1	M	S	0	X								X			0	0	1	0	0
2	F	M	3	X								X			0	0	3	0	12
3	F	M	2	X	X				X					X	2	1	1	2	29
4	F	M	4	X					X						2	2	1	2	12
5	F	S	0		X						X				3	0	1	0	1
6	F	M	0		X						X				4	0	0	0	3
7	F	M	3					X			X				2	0	1	0	2

*M = Married, S = Single, 0 = Other

TABLE 2

SUMMARY OF THE BACKGROUNDS OF THE STUDENTS
IN THE GREEN BAY PILOT COURSE

Subject Number	Sex (M,F)	Marital Status*	No. of Children	Day Services Position					Educational Background						No. of Courses or Workshops - Child Development	No. of Courses or Workshops - Early Childhood Education	No. of Courses or Workshops - Mentally Hand.	No. of Courses or Workshops - Behavior Mgt.	Yrs. Experience Working with Children
				Administrator	Teacher	Aide	Home Trainer	Other	High School	Vocational School	B.S. or B.A.	M.S. or M.A.	Ph.D. or Ed.D	Other					
1	F	S	0		X					X					1	0	1	0	6
2	F	M	4				X				X				2	0	4	3	6
3	F	M	3		X									X	1	1	2	0	11
4	F	M	3	X	X						X				10	3	2	0	6
5	F	M	0	X				X			X				2	0	0	0	4
6	F	M	3			X			X						1	0	0	0	3
7	F	M	0		X			X			X				4	2	1	0	2

*M = Married, S = Single, 0 = Other

pertaining to their educational and personal backgrounds. A summary of this data is presented in Table 3.

The information indicates that the students performed a variety of center functions and had educational backgrounds ranging from high school through a bachelor's degree. Fifty percent had had child development courses or workshops; 25% had had early childhood education courses or workshops; and 40% had had courses or workshops pertaining to the mentally handicapped. Only one of the twenty students had had a workshop or course related to behavior management.

Summary. Of the thirty-four day services' students enrolled in the three pilot courses only two were male. Four of the females were single and twenty seven were married. Of the twenty-seven married women, twenty had children of their own. This information would seem to indicate that the day services centers have many staff who have family responsibilities in addition to their center work.

The students performed a wide variety of day services functions ranging from volunteer work to program administration.

The educational backgrounds of the students were widely varied. Ten of the thirty-four students had only high school diplomas and sixteen had B.S. or B.A. degrees. Only two had M.A. or M.S. degrees.

Many of the bachelor's degrees were in areas such as home economics or the social sciences as opposed to education.

The course or workshop experiences were greatly varied. The areas with the fewest reported course or workshop experiences were behavior management and early childhood education.

The years of working experience with children appeared to be the most unreliable category because many of the experiences reported dealt with volunteer positions. Therefore, conclusions pertaining to this category should be extremely limited.

Extent to Which Students in the Three Pilot Courses Felt Their Objectives for the Courses Were Met

Eau Claire Pilot Course. Six of the Eau Claire students returned the questionnaire rating the extent to which they felt their personal objectives were met by the course. These six students had listed a total 27 objectives for the course. Their ratings for these objectives were as follows:

TABLE 3

SUMMARY OF THE BACKGROUNDS OF THE STUDENTS
IN THE STEVENS POINT PILOT COURSE

Subject Number		1	2	3	4	5	6	7	8
Sex (M, F)		F	F	F	F	F	F	F	F
Marital Status*		M	O	M	M	M	M	M	M
No. of Children		1	1	0	3	0	4	4	3
Day Services Position	Administrator			X	X				X
	Teacher						X		
	Aide					X		X	
	Home Trainer								
	Other	X	X						
Educational Background	High School		X			X		X	
	Vocational School								
	B.S. or B.A.	X		X	X		X		X
	M.S. or M.A.								
	Ph.D. or Ed.D								
	Other								
No. of Courses or Workshops - Child Development		2+	0	2	1	0	1	0	1
No. of Courses or Workshops - Early Childhood Education		0	0	2	0	1	0	0	2
No. of Courses or Workshops - Mentally Hand.		0	0	2	1	1	1	0	3
No. of Courses or Workshops - Behavior Mgt.		0	0	0	1	0	0	0	0
Yrs. Experience Working with Children		8	0	6	6	4	9	1	6

TABLE 3 (continued)

Subject Number	Sex (M, F)	Marital Status*	No. of Children	Day Services Position					Educational Background						No. of Courses or Workshops - Child Development	No. of Courses or Workshops - Early Childhood Education	No. of Courses or Workshops - Mentally Hand.	No. of Courses or Workshops - Behavior Mgt.	Yrs. Experience Working with Children
				Administrator	Teacher	Aide	Home Trainer	other	High School	Vocational School	B.S. or B.A.	M.S. or M.A.	Ph.D. or Ed.D	other					
9	F	M	0					X			X				1	0	0	0	2
10	F	M	1		X				X						0	0	0	0	7
11	F	M	3					X	X						0	0	0	0	5
12	F	M	8		X				X						3	0	0	0	0
13	F	M	2		X									X	2	0	0	0	24
14	F	M	0					X		X					0	0	0	0	2
15	M	M	0					X		X					0	0	0	0	0
16	F	S	0	X							X				2	1	0	0	4
17	F	M	2		X			X			X				1	5	2	0	8

TABLE 3 (continued)

Subject Number	Sex (M, F)	Marital Status*	No. of Children	Day Services Position						Educational Background						No. of Courses or Workshops - Child Development	No. of Courses or Workshops - Early Childhood Education	No. of Courses or Workshops - Mentally Hand.	No. of Courses or Workshops - Behavior Mgt.	Yrs. Experience Working with Children
				Administrator	Teacher	Aide	Home Trainer	other		High School	Vocational School	B.S. or B.A.	M.S. or M.A.	Ph.D. or Ed.D	other					
18	F	M	0			X						X				1	0	0	0	2
19	F	M	6					X		X						0	0	3	0	3
20	F	M	-	X							X					1	0	6	0	22

*M = Married, S = Single, O = Other

Very Well Satisfied	2
Well Satisfied	6
Satisfied	6
Somewhat Dissatisfied	9
Very Dissatisfied	1
Not Rated	3

The students appeared to be satisfied that the pilot course had been satisfactory in helping them accomplish slightly over one-half of their personal objectives for the course. Dissatisfaction dealt primarily with objectives related to the following:
a) techniques for use with preschool children;
b) normal developmental sequences;
c) the lack of related bibliographies; and
d) motivating brain-injured children.

Green Bay Pilot Course. Five of the Green Bay students returned the questionnaire rating the extent to which they felt their personal objectives were met by the course. These five students had listed a total of 22 objectives for the course. Their ratings for these objectives were as follows:

Very Well Satisfied	7
Well Satisfied	2
Satisfied	4
Somewhat Dissatisfied	3
Very Dissatisfied	2
Not Rated	4

Of the 22 objectives, dissatisfaction was expressed with regard to five. Dissatisfaction dealt with objectives related to the following: a) teaching self help skills; b) evaluating individuals; c) specific methods for helping children; and d) knowledge of resource people and materials geared to the handicapped.

Stevens Point Pilot Course. Eight of the Stevens Point students returned the questionnaire rating the extent to which they felt their personal objectives were met by the course. These eight students had listed a total of 33 objectives for the course. Their ratings for these objectives were as follows:

Very Well Satisfied	9
Well Satisfied	5
Satisfied	5
Somewhat Dissatisfied	12
Very Dissatisfied	1
Unrated	1

The students appeared to be satisfied that the pilot course had helped them accomplish over 50% of their objectives. Dissatisfaction dealt primarily with objectives related to the following: a) methods of working with the children; b) understanding handicapped children; c) understanding and helping one's own handicapped child; d) working with autistic cerebral palsied children, and emotionally disturbed children; e) individual therapy; and f) help in becoming a better aide or volunteer.

Summary. Generally, the findings seem to indicate that the students were satisfied that over one-half of their personal objectives were met by the course. Many volunteered comments concerning the fact that although some of their personal objectives weren't met, they had found the courses to be highly valuable and rewarding.

Extent to Which Students Felt the Content Areas Were Covered in the Three Pilot Courses

The ratings of the students with regard to the course content coverage is reported in Table 4.

On the 23 topics on the proposed course outline, the six Eau Claire students awarded the following number of ratings per category:

Excellent	17
Good	49
Average	40
Little	20
No Coverage	3

Thus, it would appear that 82% of the topics had received average or better coverage as rated by the six students.

On the 23 topics on the proposed course outline, the five Green Bay students awarded the following number of ratings per category:

Excellent	39
Good	25
Average	29
Little	15
No Coverage	8

Thus, it would appear that 77% of the topics had received average or better coverage as rated by the five students.

TABLE 4

STUDENT RATINGS OF THE COURSE CONTENT COVERAGE

Course Outline Topics	Student Ratings*														
	Excellent			Good			Average			Little			Not Covered At All		
	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point
A. Fundamental principles of growth & development	1	2	3	1	1	1	3	1	1	0	0	1	0	0	0
1. Physical development	1	2	3	1	1	1	0	1	0	1	0	1	0	0	0
a. Patterns & conditions controlling & affecting size	0	1	2	0	1	2	2	0	1	3	2	1	1	1	1
b. Advantages and importance of routine child medical care	0	1	2	1	1	3	4	1	2	1	2	0	0	0	1
c. Health and first aid	1	1	1	2	1	3	1	1	1	1	1	2	0	1	1
d. Nutrition	0	2	2	3	0	2	1	1	0	2	1	3	0	1	1
e. Safety	0	2	2	2	1	2	2	0	0	0	1	3	1	1	2
2. Motor development	0	3	2	2	0	3	4	2	1	0	0	2	0	0	0
3. Emotional development	0	2	2	3	2	2	3	0	2	0	0	1	0	1	1
4. Social development	0	2	1	3	1	3	3	0	2	0	2	1	0	0	1
5. Communication	0	1	2	1	3	3	3	1	0	2	0	0	0	0	1
6. Intellectual development	0	1	1	3	3	2	2	0	4	1	0	0	0	1	1
a. Heredity vs. environment	0	1	4	3	0	2	1	2	1	2	1	1	0	1	0
b. Testing & interpretation	0	1	3	1	1	2	1	2	2	4	0	1	0	1	0

TABLE 4 (continued)

Course Outline Topics	Student Ratings*														
	Excellent			Good			Average			Little			Not Covered At All		
	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point
c. Diagnostic labels	2	1	2	3	1	3	1	0	1	0	3	2	0	0	0
d. Terminology	1	2	2	3	0	2	1	3	1	0	0	2	0	0	0
B. Medical reasons causing or related to mentally handicapping conditions	2	1	5	4	1	2	0	2	1	0	0	0	0	0	0
1. Prenatal factors	2	1	4	3	1	3	1	3	1	0	0	0	0	0	0
C. Physical and mental problems associated with the mentally handicapped child	1	2	3	2	1	4	3	0	1	0	1	0	0	0	1
II. Basic Principles of Planning & Implementing a Program for the Day to Day Education of a Mentally Handicapped Child.	0	0	0	0	1	2	2	2	0	2	1	1	1	0	4
A. How to write a behavioral objective	2	3	3	2	2	2	1	0	1	1	0	2	0	0	0

TABLE 4 (continued)

Course Outline Topics	Student Ratings*														
	Excellent			Good			Average			Little			Not Covered At All		
	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point	Eau Claire	Green Bay	Stevens Point
B. How to determine what behaviors are creating problems for the child	1	3	4	3	1	2	1	7	2	1	0	0	0	0	0
C. How to develop maximum effective behavior	3	4	4	3	1	2	0	0	2	0	0	0	0	0	1

*Eau Claire = 6 reports, Green Bay = 5 reports, Stevens Point = 8 reports

On the 23 topics on the proposed course outline, the eight Stevens Point students awarded the following number of ratings per category:

Excellent	57
Good	55
Average	27
Little	24
No coverage	16

Thus, it would appear that 77% of the topics had received average or better coverage as rated by the eight students.

Pre-and Post Test Scores of the Students in the Three Pilot Courses

All of the students who were present at the first and last sessions of each of the pilot courses were administered the same pre- and post-tests. The results of the test scores are presented in Table 5 as the percentage of questions pertaining to each topic which were scored correctly. It should be noted that fewer students took the post-test in all three pilot courses.

Readability of the Texts and Other Readings Utilized in or Recommended for the Course

A wide variety of texts and other readings were either proposed in the course outline, actually utilized in the pilot courses, or proposed for use in future offerings of the course. The rules and procedures in applying the Flesch reading formula as described in the book How to Test Readability[1] were utilized in analyzing the texts and other readings. The readability of the materials as determined through the utilization of this method is presented in Table 6, page 25.

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[1] Rudolph Flesch, How to Test Readability. (New York: Harper and Row, 1951), pp. 1-10.

TABLE 5

TEST-SCORES-ANALYSIS - ALL CENTERS[2]

Topic	Eau Claire Tests Pre- (N=7)	Eau Claire Tests Post- (N=5)	Green Bay Tests Pre- (N=8)	Green Bay Tests Post- (N=6)	Stevens Point Tests Pre- (N=27)	Stevens Point Tests Post- (N=21)	Average All Centers Pre- (N=42)	Average All Centers Post- (N=32)
I. A. 1.								
a. Growth patterns	81%	77%	84%	87%	73%	76%	79%	80%
b. Medical care	59	68+	62	62	61	60	60	63
c. Health & First Aid	74	81+	72	76	75	71	73	76
d. Nutrition	79	91+	82	78	71	79+	77	82+
e. Safety	97	92	89	89	90	91	92	90
2. Motor Development	65	71+	66	70	62	63	64	68
3. Emotional Development	85	87	82	89+	85	84	84	86
4. Social Development	95	97	94	92	90	90	93	93
5. Speech & Language Development	81	80	86	72	79	74	82	75
6. Intellectual Development								
a. Environment/ Hereditary	78	80	50	58+	77	66	68	68

TABLE 5 (continued)

Topic	Eau Claire Tests Pre- (N=7)	Eau Claire Tests Post- (N=5)	Green Bay Tests Pre- (N=8)	Green Bay Tests Post- (N=6)	Stevens Point Tests Pre- (N=27)	Stevens Point Tests Post- (N=21)	Average All Centers Pre- (N=42)	Average All Centers Post- (N=32)
b. Testing & Interpretation	88%	86%+	85%	97%+	73%	86%+	82%	89%+
c. Implications & Diag. Labels	90	80	87	100	83	87	86	89
d. Terminology/Ment. Disabled	55	76+	60	60	38	48+	51	61
B. Medical Reasons/Mental Hand.								
1. Prenatal factors	56	86+	77	86+	50	77+	61	83+
C. Physical & Mental Problems								
1. Medical Prob. & Symptomology								
a. Seizure disorders	64	75+	56	83+	50	67+	56	75+
b. Motor) c. Visual) d. Feeding)---- e. Hyperactivity) f. congenital)	100	100	87	91	92	87	93	92

TABLE 5 (continued)

Topic	Eau Claire Tests Pre- (N=7)	Eau Claire Tests Post- (N=5)	Green Bay Tests Pre- (N=8)	Green Bay Tests Post- (N=6)	Stevens Point Tests Pre- (N=27)	Stevens Point Tests Post- (N=21)	Average All Centers Pre- (N=42)	Average All Centers Post- (N=32)
II. Principles of Ed. Mental Handicapped								
A. Writing Behavioral Objective								
1. Stating the Behavioral Objective	75%	76%	79%	88%	55%	56%	69%	73%
2. Factors to Consider	82	86	75	86+	56	68+	71	80+
B. Behaviors Creating Problems								
1. Skills Necessary	75	80+	69	68	72	66	72	71
2. Interferring Behaviors	59	60	64	79+	49	53	57	64+
C. Maximum Effective Behavior								
1. Strengthen "good" Behavior	68	85+	70	66	56	70+	64	73+
2. Eliminate "bad" Behavior	92	100+	97	94	87	92+	92	95

TABLE 5 (continued)

Topic	Eau Claire Tests Pre- (N=7)	Eau Claire Tests Post- (N=5)	Green Bay Tests Pre- (N=8)	Green Bay Tests Post- (N=6)	Stevens Point Tests Pre- (N=27)	Stevens Point Tests Post- (N=21)	Average All Centers Pre- (N=42)	Average All Centers Post- (N=32)
Total Average Percent Correct	75%	81%+	75%	78%	65%	70%+	71%	76%+

Eau Claire Pre-	Eau Claire Post-	Green Bay Pre-	Green Bay Post-	Stevens Point Pre-	Stevens Point Post-	All Centers Pre-	All Centers Post-

[2]All figures reported indicate the percentage of the test items pertaining to the respective topic that were scored correctly by the students.

[+]A plus sign (+) indicates at least a 5% increase in the items scored correctly.

TABLE 6

READABILITY OF THE TEXTS AND OTHER READINGS UTILIZED IN OR RECOMMENDED FOR THE COURSE ENTITLED THE DEVELOPMENT AND EARLY EDUCATION OF THE MENTALLY HANDICAPPED CHILD

Author	Title	Recommended Course Outline	Utilized Eau Claire Course	Utilized Green Bay Course	Utilized Stevens Point Course	Recommended Eau Claire	Recommended Green Bay	Recommended Stevens Point	Flesch Reading Index Score	Estimate Grade Level
Becker, Wesley G.	Parents are Teachers: A Child Management Program		X		X	X			73	7th grade
Bensberg, Gerald J. (ed.)	Teaching the Mentally Retarded					X			76	7th grade
Buckler, Beatrice	Living With a Mentally Retarded Child, A Primer for Parents								68	8th grade
Cherry, Clane	Creative Movement for the Developing Child							X	85	5th grade
Cohen, Stewart	Child Development A Study of Growth Processes						X		39	14th grade

TABLE 6 (continued)

Author	Title	Recommended Course Outline	Utilized Eau Claire Course	Utilized Green Bay Course	Utilized Stevens Point Course	Recommended Eau Claire	Recommended Green Bay	Recommended Stevens Point	Flesch Reading Index Score	Estimate Grade Level
Cratty, Bryant J.	Developmental Sequences of Perceptual-Motor Tasks									10th-12th grade
Deibert, Alvin N. & Harmon, Alice J.	New Tools for Changing Behavior				X					6th grade
Div. of Family Services State of Wis.	Rules for Licensing Day Care Centers for Children	X								13th-16th grade
Farber, Bernard	Mental Retardation, Its Social Context and Social Consequences									college graduate

TABLE 6 (continued)

Author	Title	Recommended Course Outline	Utilized Eau Claire Course	Utilized Green Bay Course	Utilized Stevens Point Course	Recommended Eau Claire	Recommended Green Bay	Recommended Stevens Point	Flesch Reading Index Score	Estimate Grade Level
Foster, Genevieve W. & others	Child Care Work with Emotionally Disturbed Children								63	9th grade
Fraiberg, Selma H.	The Magic Years				X				61	9th grade
Gardner, William I.	Behavior Modification in Mental Retardation; The Education and Rehabilitation of the Mentally Retarded Adolescent and Adult	X		X					12	College graduate
Holt, John	How Children Fail	X						X		7th grade
Hunter, Marvin & others	The Retarded Child From Birth to Five					X			54	10th-12th grade
Hurlock, Elizabeth	Child Development						X		56	10th-12th grade

TABLE 6 (continued)

Author	Title	Recommended Course Outline	Utilized Eau Claire Course	Utilized Green Bay Course	Utilized Stevens Point Course	Recommended Eau Claire	Recommended Green Bay	Recommended Stevens Point	Flesch Reading Index Score	Estimate Grade Level
Jordan, Thomas	The Mentally Retarded Child								35	College level
Kasner, Leonard & Ullman, Leonard P.	Research in Behavior Modification	X							41	College level
Krumboltz, John D. & Krumboltz, Helen B.	Changing Children's Behavior				X				55	10th-12th grade
Levine, Milton & Seligmann, Jean	Your Overweight Child							X	81	6th grade
Mager, Robert F.	Preparing Instructional Objectives	X		X						8th-9th grade

TABLE 6 (continued)

Author	Title	Recommended Course Outline	Utilized Eau Claire Course	Utilized Green Bay Course	Utilized Stevens Point Course	Recommended Eau Claire	Recommended Green Bay	Recommended Stevens Point	Flesch Reading Index Score	Estimate Grade Level
McCandless, Boyd R.	Children: Behavior and Development							X	45	College level
McWilliams, Margaret	Nutrition for the Growing Years								48.5	13th grade
Malloy, Julia	Teaching the Retarded Child to Talk					X			76	7th grade
Muller Philippe	The Tasks of Childhood							X	50	12th grade
Mussen, Paul & Others	Child Development and Personality	X							32	College level
Patterson, Gerald R. & Gullion, M.E.	Living With Children: New Methods for Parents and Teachers	X								8th-9th grade

TABLE 6 (continued)

Author	Title	Recommended Course Outline	Utilized Eau Claire Course	Utilized Green Bay Course	Utilized Stevens Point Course	Recommended Eau Claire	Recommended Green Bay	Recommended Stevens Point	Flesch Reading Index Score	Estimate Grade Level
Schwartz, Edward M.	Toys That Don't Care	X							43	College level
Shiller, Jack G.	Childhood Illness: A Common Sense Approach							X	86	6th grade
Smart, Mollie S. & Smart, Russell G.	Children: Development and Relationships							X	42	College level
Smith, Judith M. & Smith, Donald E.P.	Child Management A Program for Parents and Teachers	X								7th grade
Spock, Benjamin	Baby and Child Care			X			X		57	10th-12th grade
Valett, Robert E.	Modifying Children's Behavior				X				85	5th grade

TABLE 6 (continued)

Author	Title	Recommended Course Outline	Utilized Eau Claire Course	Utilized Green Bay Course	Utilized Stevens Point Course	Recommended Eau Claire	Recommended Green Bay	Recommended Stevens Point	Flesch Reading Index Score	Estimate Grade Level
Vernon, Walter M.	Motivating Children: Behavior Modification in the Classroom				X				37	College level

Faculty and Consultant Evaluations of the Three Pilot Courses

At the project review meeting and by mail correspondence the Green Bay pilot course coordinator indicated that the Green Bay instructors had received positive feedback regarding the course and that offering the course over a several month period of time was desirable in the Green Bay area. She indicated that she felt the content pertaining to health, nutrition, and first aid and safety could be removed from the course outline because the students felt adequately informed in these areas.

The Stevens Point coordinator noted the difficulty in providing continuity when many guest lecturers are utilized. She felt that information pertaining to the day to day operation of programs or centers should be included in the course because so many of the students requested help in this area. Responses to the instructor's evaluation form indicated that the course was very well received.

The coordinators of all three pilot courses reported that it was extremely difficult to find staff who were qualified to teach the pilot courses. All centers had to rely on more than one person.

Some of the students in all of the centers expressed dissatisfaction in the fact that it took a great deal of time to complete the research components of this project.

CHAPTER IV

CONCLUSIONS AND RECOMMENDATIONS

The conclusions and recommendations based on the findings of the research in this study are presented under the following major topics: a) Backgrounds of the Students Enrolled in the Three Pilot Courses; b) Extent to Which Students in the Three Pilot Courses Felt Their Objectives for the Courses Were Met; c) Extent to Which Students Felt the Content Areas Were Covered in the Three Pilot Courses; d) Pre- and Post-Test Scores of the Students in the Three Pilot Courses; e) Readability of the Texts and Other Readings Utilized in or Recommended for the Course; and f) Faculty and Consultant Evaluations of the Three Pilot Courses and the Proposed Course Outline.

Backgrounds of the Students Enrolled in the Three Pilot Courses

In view of the fact that twenty of the thirty-four day services students in the three pilot programs were married women with children of their own, it would appear that there continues to be a need for courses of this nature located at centers which do not require a great deal of travel on the part of the students. It is recommended that the VTAE districts consider a "circuit rider" approach to serving the needs of many students in rural areas.

The varied educational backgrounds of the students enrolled in the pilot courses would seem to indicate the need for the careful selection of reading materials. It is recommended that references with high school reading levels be included in the course readings as well as some references for more advanced students.

The day services students' general lack of professional courses or experiences in the areas of early childhood education and behavior management would seem to indicate the need for the continued emphasis of these areas in courses of this nature.

Extent to Which Students in the Three Pilot Courses Felt Their Objectives for the Courses Were Met

The students in the three pilot courses were satisfied that the pilot courses had been satisfactory or better in helping

them accomplish their personal objectives for the courses. It should be noted that many of the personal objectives which were not met in the course dealt with areas other than those designated as appropriate for the course in the course outline. It is recommended that students in courses of this nature be asked to specify personal objectives within the framework of the designated topics.

Extent to Which Students Felt the Content Areas Were Covered in the Three Pilot Courses

Based on the fact that the students in the three pilot courses indicated that 77%, 82%, and 77% of the course outline content had been covered in a satisfactory or better fashion, it is concluded that the course content and experiences were well presented in the three pilot courses.

The comments of many of the students and staff would seem to indicate that the courses were expected to cover far too much material. Therefore, it is recommended that the VTAE schools revise the course outline and eliminate the content which is not essential. This will be particularly important if the course is also expected to help meet the individual objectives of the students.

Pre- and Post-Test Scores of the Students in the Three Pilot Courses

Although only a 5% average test score increase was noted between the pre and post test scores, there were many course topics on which much larger percentage increases were attained. Because of the vast amount of material to be covered and the fact that some topics in each pilot course were not covered at all, the average 5% increase was not surprising. It is recommended that each center note the areas in which their students did not make significant test score increases and concentrate on improving the coverage of these topics in future offerings of the course.

Readability of the Texts and Other Readings Utilized In or Recommended for the Course

Based on the readability levels of the text books recommended in the course outline and the educational backgrounds of the day services students, it is highly recommended that new text books and readings be selected. Recommendations of

other resources have been suggested by consultants to the three programs. Their recommendations are presented in Appendix D of this report.

Faculty and Consultant Evaluations of the Three Pilot Courses

Based on faculty and consultant suggestions, it is recommended that: a) the results of this study be utilized in revising the course outline in terms of reducing the content to be covered and revising the references, and resources to be utilized; and b) consideration be given to advertizing both the Young Child I and The Development and Early Education of the Mentally Handicapped Child courses and running them concurrently so that staff and resources may be utilized most efficiently and effectively.

The results of this research seem to indicate that the course The Development and Early Education of the Mentally Handicapped Child can be implemented successfully by VTAE districts with the use of consultant personnel. Therefore, it is, recommended that the revised course (when completed) be disseminated to other areas (particularly rural) of the state.

APPENDIX A: COURSE OUTLINE FOR THE DEVELOPMENT AND EARLY EDUCATION OF THE MENTALLY HANDICAPPED CHILD

COURSE OUTLINE AND RECOMMENDED TEXT READINGS

Course Title: THE DEVELOPMENT AND EARLY EDUCATION OF THE MENTALLY HANDICAPPED CHILD

Length of Course: 40 hours (longer if desired)

Prerequisite: None

Course Description: The course is designed to help the student working with the mentally handicapped child. It is designed to teach the student the skills necessary in helping children to overcome behavioral problems, developmental disabilities and social/personal problems. While emphasis is on the mentally handicapped, the basic principles of growth and development and child care are included.

This course will help the student meet the basic educational qualifications of all personnel assuming secondary responsibility for children in licensed day care centers.

This course is required for all untrained staff and recommended for all other staff who care for children in centers for the mentally handicapped.

General Objectives of Course:

1. To teach the fundamental principles of child growth and development.
2. To present the etiology of mentally handicapping and developmentally disabling conditions.
3. To upgrade the quality of service to children in day services centers for the mentally handicapped.
4. To promote understanding of children as individuals with varying needs, environments, and rates of development.
5. To present practical usable methods to students whereby they can work effectively with children with behavioral and developmental problems.

Course Content:

Section I - 10 hours minimum

I. Basic Principles of Child Development and the Etiology of Mentally Handicapping and Developmentally Disabling Conditions.

A. Fundamental principles of growth and development

1. Physical development

a. Discuss growth patterns and conditions that normally control growth and affect ultimate size.

b. Present advantages and importance of routine child medical care.

6. Intellectual development

a. Discuss the environmental/hereditary aspects of a child's intellectual development and the importance of the social response patterns of a child in determining his effectiveness in every day situations.

b. Discuss testing and its interpretation to include the following:

(1) IQ tests/neural efficiency analysis
(2) The cultural bias of test
(3) The problems with test interpretation
(4) The problems of presenting test results and derived interpretations to parents and other agencies

c. Discuss the implications and diagnostic labels

(1) Importance of diagnostic labeling

(a) Implications in treatment and remediation of certain problems.
(b) Prognosisfor life and future development
(c) Genetic counseling

(2) Importance of treating labels properly

(a) Don't use to stereotype child
(b) Don't build expectations based upon labels
(c) Label won't predict how a child will behave and function

d. Discuss the commonly used terminology applied to developmentally disabled children to include the following:

(1) Retarded
(2) Psychotic
(3) Brain damaged
(4) Hyperkinetic child syndrome
(5) Specific language delay
(6) Specific learning disability
(7) Others

B. Discuss medical reasons causing or relating to mentally handicapping conditions

1. Present prenatal factors associated with mental handicaps to include:

a. Genetic and hereditary aspects - e.g. PKU, mucopolysaccharidosis, etc.
b. Maternal infections: e.g. rubella, syphilis, toxaplasmosis, etc.
c. Trauma, drugs, radiation, etc.

Recommended Text Readings for Section I

RESEARCH IN BEHAVIOR MODIFICATION, Leonard Krasner and Leonard P. Ullmann, Holt, Rinehart and Winston.

Reading 5 - Operant Conditioning of Verbal Behavior of Two Young Speech-deficient Boys

Reading 6 - Stuttering and Fluency as Manipulatable Operant Response Classes.

Reading 7 - Responsiveness to Social Stimuli

Reading 9 - Verbal Conditioning and Psychotherapy

Reading 10 - The Human Reinforcer in Verbal Behavior Research

Reading 15 - Behavioral Modification Through Modeling Procedures

BEHAVIOR MODIFICATION IN MENTAL RETARDATION: THE EDUCATION AND REHABILITATION OF THE MENTALLY RETARDED ADOLESCENT AND ADULT, William I. Gardner. Aldine-Atherton, 1971
Chapter 1

Note: A list of films many of which are pertinent to this section of the course is included after the recommended readings for Section II.

e. How special events such as holidays, birthdays, field trips, movies, special projects, etc. can be used to develop and maintain certain skills

B. How to determine what behaviors are creating problems for child. What behavior does a child display that retards his acquisition of appropriate skills?

1. Determine what skills are necessary for child

a. Appropriate skills should be ascertained on the basis of child's individual needs, not on the basis of existing curriculum.

b. Child's environmental requirements should be carefully evaluated in order to determine what skills are of major importance to help him function more effectively.

2. Determine what behavior is interferring with the development of necessary skills

a. Observation: By one or more methods of observation (i.e., time sample, anecdotal reports, fixed interval sample, etc.) make measurements of interferring behavior in terms of: frequency, intensity, and duration.

b. Discussion with child

c. Parent reports

d. File reports

It is important to remember that much past information may be irrelevant since the "here and now" aspect of the child's behavior is what the teacher and the day services environment have to work and contend with.

C. How to develop maximum effective behavior. Emphasis in this area should be on <u>how</u> learning best takes place, rather than on <u>what</u> can be learned since the latter is largely unanswerable.

1. Strengthen good (adaptive, effective) behavior. (At first it may be necessary to reward behavior that only approximates the actual desired behavior because this final behavior may be displayed too infrequently, or not at all, thereby making it difficult or impossible to reward the child)

a. Determine what is rewarding for child

b. Use rewards to increase frequency and/or duration and/or intensity of desired behavior

c. Use of rewards should be "thinned" as behavior becomes part of child's routine in order to insure that it will not be extinguished in other situations where the reward is not available or applied.

Recommended Text Readings for Section II

BEHAVIOR MODIFICATION IN MENTAL RETARDATION: THE EDUCATION AND REHABILITATION OF THE MENTALLY RETARDED ADOLESCENT AND ADULT, William I. Gardner. Aldine - Atherton, 1971

Chapters 1-14

RESEARCH IN BEHAVIOR MODIFICATION, Leonard Krasner and Leonard P. Ullmann Holt, Rinehart and Winston, 1965

Reading 1 - An Introduction to Research in Behavior Modification

Reading 2 - Classification of Behavioral Pathology

Reading 3 - A Case in and a Strategy for the Extension of Learning Principles to Problems of Human Behavior

Reading 4 - Experimental Studies of Child Behavior, Normal and Deviant

Reading 12 - The "Reinforcement" of Individual Actions in a Group Situation

Reading 13 - A Case History of Attempted Behavior Manipulation in a Psychiatric Ward

Reading 17 - Summary and Implications

Recommended Films for Course*

Behavior Modification: Teaching Language to Psychotic Children.
Color - $17.50 - 42 minutes (based on work of Ivas Lovas - UCLA)
Appleton-Century-Crafts - 1969

Behavior Modification in the Classroom
Color - $8.25 - 22 minutes - University of California - 1971

Color Her Sunshine
Color - $4.75 - 15 minutes - Sutherland, 1958

Developmental Evaluation in Infancy I
B/W - $4.50 - 42 minutes - Ohio State University - 1966

Developmental Evaluation in Infancy II
B/W - $2.25 - 18 minutes - Ohio State University - 1966

Long Time to Grow
B/W - $4.00 - 35 minutes - NYU - 1954

Principles of Development
B/W - $3.50 - 16 minutes - McGraw-Hill - 1950

Techniques of Non-Verbal Psychological Testing
Color - $6.75 - 20 minutes - International Film Bureau - 1964

Testing Multiply Handicapped Children
B/W - $2.75 - 30 minutes - United Cerebral Palsy - 1963

Blocks...A Medium for Perceptual Learning
Color - $6.75 - 17 minutes - Campus - 1969

Teaching the Mentally Retarded--A Positive Approach
B/W - $2.00 - 22 minutes - U.S. Health, Education, & Welfare - 1966

*All the listed films are 16mm films, which can be rented through:

BUREAU OF AUDIO-VISUAL INSTRUCTION
UNIVERSITY OF WISCONSIN EXTENSION
1327 UNIVERSITY AVENUE
MADISON, WISCONSIN 53706

Suggested Readings for the Course

MENTAL RETARDATION, ITS SOCIAL CONTEXT AND SOCIAL CONSEQUENCES, Bernard Farber. Houghton, 1968.

POVERTY AND MENTAL RETARDATION, Roger Kurley. Random, 1969.

THE MENTALLY RETARDED CHILD, Abraham Levinson. Day, rev. ed. 1965.

THE GIFTS THEY BRING, Pearl S. Buck and Gweneth Zarfoss. Day, 1965.

MONTESSORI AND THE RETARDED CHILD, Lena L. Gitter. American Montessori Society, 1964.

TEACHING THE RETARDED CHILD TO TALK, Julia S. Malloy. Day, 1961.

SING AND LEARN, John W. Antey. John Day, 1965.

THE EDUCABLE MENTALLY RETARDED CHILD AND HIS TEACHER, Stella Slaughter. Davis, 1964.

....AND A TIME TO DANCE, Norma Canner. Beacon Press, 1968.

BEHAVIOR THERAPY WITH CHILDREN, Anthony M. Graziano. Aldine-Atherton

BEHAVIOR MODIFICATION IN CHILD TREATMENT: AN EXPERIMENTAL AND CLINICAL APPROACH, Robert M. Browning and Donald O. Stover. Aldine-Atherton

LIVING WITH CHILDREN, Patterson

MANAGING CLASSROOM BEHAVIOR, Walker

PREPARING INSTRUCTIONAL OBJECTIVES - Mager

CHILD DEVELOPMENT AND PERSONALITY, Kagan, Mussen and Congers. Harper and Row

CHILD MANAGEMENT, Smith and Smith. Ann Arbor Publishers, 1966.

RULES FOR LICENSING DAY CARE CENTERS FOR CHILDREN, Division of Family Services. State of Wisconsin, March 1971

TOYS THAT DON'T CARE, S. Swartz. Gambit Inc., 1971

BABY AND CHILD CARE, Benjamin Spock. Pocket Books, Rev. 1968

HOW CHILDREN LEARN, John Holt. Dell, 1970

HOW CHILDREN FAIL, John Holt. Dell, 1970

DAY CARE: SERVING CHILDREN WITH SPECIAL NEEDS, U.S. Department of Health, Education and Welfare. Office of Child Development, 1972

APPENDIX B: STUDENT SURVEY FORMS

THE EARLY EDUCATION OF THE MENTALLY HANDICAPPED CHILD
SURVEY OF STUDENTS' NEEDS

Date: _____

Name: _____ ____Green Bay

____Eau Claire

____Stevens Point

Please list at least five objectives describing what you would like to learn in this course:

1. _____

_____

_____

_____

2. _____

_____

_____

_____

3. _____

_____

_____

_____

4. _____

_____

_____

_____

5. _____

_____

_____

_____

Others: _____

_____

_____

Survey of Students Who Participated

in the VTAE Course Entitled

The Development and Early Education

of the Mentally Handicapped Child

May 10, 1973

Dear Student:

We are requesting that each of the students in a pilot offering of the course entitled "The Development and Early Education of the Mentally Handicapped" complete this survey so that we will be able to identify the texts, resources, speakers, etc., that were found to be the most helpful to you. A second purpose would be to help us make suggestions as to how the course might be improved.

The first part of the survey contains the topics listed in the course outline. Please place a check in the box which most accurately reflects how well you felt the topic was covered.

The second part of the survey contains the objectives you had for the course. Please place a check in the box which most accurately reflects the extent to which you felt each objective was accomplished. Comments or suggestions would be appreciated.

When you have completed the form, please return it in the enclosed self addressed envelope.

The report of this research project will be available through the Wisconsin Vocational, Technical and Adult Education Board. The report will include copies of the pre-and post-tests.

Thank you for your cooperation. Your assistance is greatly appreciated.

Sincerely,

Janice M. Keil

PART ONE

Please check the center at which you took the course and then check the appropriate boxes concerning the extent to which you felt each course outline topic was covered through books, resource persons, etc.

___ Eau Claire

___ Stevens Point

___ Green Bay

	EXTENT OF COVERAGE				
COURSE OUTLINE TOPIC	Excellent	Good	Average	Little	Not Covered at all
A. Fundamental Principles of Growth & Development					
1. Physical development					
a. patterns & conditions controlling & affecting size					
b. advantages and importance of routine child medical care					
c. health and first aid					
d. nutrition					
e. safety					
2. Motor development					
3. Emotional development					
4. Social development					
5. Communication					
6. Intellectual development					
a. heredity vs. environment					
b. testing & interpretation					
c. diagnostic labels					
d. terminology					
B. Medical reasons causing or related to mentally handicapping conditions					
1. Prenatal factors					
C. Physical and mental problems associated with the mentally handicapped child					
II. Basic Principles of Planning & Implementing a Program for the Day to Day Education of a Mentally Handicapped Child.					

COURSE OUTLINE TOPIC	EXTENT OF COVERAGE				
	Excellent	Good	Average	Little	Not Covered at all
A. How to write a behavioral objective					
B. How to determine what behaviors are creating problems for the child					
C. How to develop maximum effective behavior					

Comments:

PART TWO

The objectives you listed for the course have been listed below. Please place a check in the box which indicates how well you felt this personal objective was met or satisfied.

Objective No.	Objective	very well satis-fied	well satis-fied	satis-fied	some-what dissat-isfied	very dis-satis-fied
1						
2						
3						
4						

Objective No.	Objective	very well satis-fied	well satis-fied	satis-fied	some-what dissat-isfied	very dis-satis-fied
5						
6						
7						
8						
9						

Objective No.	Objective	very well satis-fied	well satis-fied	satis-fied	some-what dissat-isfied	very dis-satis-fied
10						

Comments:

Please fill out these forms and send them to me in the enclosed pre-paid envelopes.

APPENDIX C: PARTS I AND II OF THE TEST DEVELOPED TO ASSESS THE STUDENTS' KNOWLEDGE OF THE CONTENT SPECIFIED FOR THE PILOT COURSES: THE DEVELOPMENT AND EARLY EDUCATION OF THE MENTALLY HANDICAPPED CHILD

THE DEVELOPMENT AND EARLY EDUCATION OF THE MENTALLY HANDICAPPED CHILD

Pre Test Part I

Name _____ Date _____

Center ____ Eau Claire. ____ Stevens Point. ____ Green Bay

Instructions: Place a T in front of all of the statements you think are true and an F in front of all statements you think are false.

___ 1. Problem behavior may be normal behavior at the age in which it occurs.

___ 2. Development occurs at the same rates for all parts of the body.

___ 3. Growth proceeds from the center of the body towards the extremities (hands, feet).

___ 4. Growth proceeds in a feet to head direction.

___ 5. Progression in physical development is from specific to general body control.

___ 6. The younger the child the more he does of everything that he is capable of doing.

___ 7. There are wide individual differences in developmental patterns.

___ 8. Development proceeds most rapidly between the ages of five through eleven.

___ 9. Development is the product of the interaction of the child (organism) and its environment.

___ 10. Your center should not pressure parents for routine medical care because they already have enough medical expenses for their mentally handicapped child.

___ 11. A child with mumps should be kept home for seven (7) days after onset of symptoms or longer if fever persists.

___ 12. If a child burns a finger you could put butter on it if you didn't have a burn ointment.

___ 13. Other than providing simple first aid and reassurance, your primary responsibility as a teacher in case of injury to a child is to make him comfortable and notify and wait for responsible persons.

___ 14. Children with runny noses should be excluded from the center regardless of the cause of the runny nose.

___ 15. Even though allergies are non-contagious and generally harmless, they have a potential for crisis.

___ 16. Good nutrition means the child eats three times a day and has a morning and evening snack.

___ 17. As teachers of mentally handicapped children, it is important that the adults are 'helpers' with the snack and not the children.

___ 18. A good nutritional program will promote social, emotional and intellectual development as well as physical development.

___ 19. The administration and staff of a center for mentally handicapped children are liable for the health and safety of the children regardless of the negligence of the child.

___ 20. Teachers who remain calm during disaster induce similar behavior in children.

___ 21. If you as a teacher feel that a child needs some kind of medication, select the appropriate medication from your first aid supply and administer it.

___ 22. Every center should have a fire extinguisher(s) which should be checked periodically in accordance with city and state regulations.

___ 23. A good program for mentally handicapped children has a greater proportion of quiet activities than active activities.

___ 24. A skipping game such as 'Skip to My Lou' would be good to use to promote motor development for children with a 3 or 4 year old motor developmental level.

___ 25. A child learns to catch balls earlier and better than he learns to throw balls.

___ 26. No amount of training can enable a child to perform to a level for which his sensory, muscular, and neural systems are not ready.

___ 27. Handedness is usually firmly established by the time the child is two years old.

___ 28. It is important to place items for the child to pick up closer to his right than his left hand.

___ 29. Mentally handicapped children should not be allowed to climb.

___ 30. Hopping is more difficult than skipping.

___ 31. It is easier to dress than it is to undress.

___ 32. Children must learn how to express and handle all emotions and not just pleasant ones.

___ 33. Showing off may be a cover-up for anxiety.

___ 34. Restlessness, nail biting, etc. may be indirect emotional reactions.

___ 35. The most common fear in babyhood is fear of loud noises.

___ 36. Emotions are present at birth.

___ 37. The younger the child the more diffuse, random, and undifferentiated are his emotions.

___ 38. Parents should compensate for the child's mental handicap by doing things for him and giving him special things they don't give their other children.

___ 39. All children require the same amount of attention and affection for emotional development.

___ 40. It is essential to provide play time in programs for mentally handicapped children.

___ 41. Parallel play refers to playing on the parallel bars.

___ 42. The patterns of social behavior established early in life tend to persist.

___ 43. Pleasant social interaction aids the mentally handicapped child in becoming accepted by the group.

___ 44. Becoming socialized involves the development of proper performance behavior, the playing of approved social roles, and the development of social attitudes.

___ 45. As a teacher you should not expect to be able to make changes in the form of a child's language if the change is not one he will regularly hear and use when he is not in school.

___ 46. The non-verbal clues you use in the classroom emphasize what has been said and often convey their own meanings more clearly than verbal language.

___ 47. If a child has a speech problem, don't encourage him to speak until he has mastered the speech sounds needed.

___ 48. Most children are able to produce all speech sounds correctly by the time they are 2 1/2 years old.

___ 49. The first words generally spoken by the child are verbs.

___ 50. A child's receptive vocabulary is always greater than his expressive vocabulary.

___ 51. Self-talk is a technique which involves a parent describing what he or she feels, sees, or is doing in the baby's presence.

___ 52. Speech development begins when the child says his first word.

___ 53. Language refers only to the "spoken word."

___ 54. Genetic counseling refers to advising people how to combine genes in order to determine the sex of their child.

___ 55. It is sometimes hazardous to label a child with a diagnostic label.

___ 56. If we know the child's diagnostic label (such as Down's syndrome) we can predict how he will behave and function.

___ 57. Neural efficiency analysis is a method of estimating a child's IQ by measuring the speed with which his nervous system transmits information to the brain.

___ 58. It is difficult to administer valid IQ tests to many handicapped children.

___ 59. The most important thing to know about a mentally handicapped child is his IQ.

___ 60. Heredity accounts for approximately 20% of the person's IQ and environment accounts for approximately 80%.

___ 61. There has been a de-emphasis of the importance of a precise IQ in determining the educational situation best suited to the needs of a particular child.

___ 62. Nystagmus is a maternal infection which may result in brain injury to the fetus.

___ 63. Hyperactivity may be the result of environmental as well as organic conditions.

___ 64. The greatest number of children with epilepsy seen in a clinic suffer from grand mal seizures.

___ 65. Petit mal, minor motor, and psychomotor, are all types of epileptic seizures.

___ 66. It is quite possible to be very explicit in setting behavioral objectives for learning skills that are cognitive, academic, social, and emotional.

___ 67. Whenever possible, it is preferable to measure the acquisition of a specific behavior in context of a meaningful activity.

___ 68. To have a child "Know how to button his coat" is a specific behavioral objective.

___ 69. Without specific statements of educational objectives, it is impossible for teachers to assess in a systematic way the effectiveness of their programs.

___ 70. Words such as "know," "show, and "comprehend" are specific words which are quite useful in formulating behavioral objectives.

___ 71. Since teachers control the environment of a center for training the mentally handicapped to a great extent, it follows that they share the responsibility with the child for behavior which develops as a consequence of his interaction with them and the world they have provided.

___ 72. Aggressive behavior in children will be encouraged if they are exposed to aggressive behavior in others, especially when shown by an admired model.

___ 73. In addition to spoken words, teachers communicate in many nonverbal ways. A teacher accompanies her actual speech with these nonverbal clues. Some of them are A tone of voice; B gestures; C facial expressions.

___ 74. Feelings about misbehavior (however the act is defined) can be instilled by punishment and praise.

___ 75. Children with feeding problems due to difficulty in motor movements should be fed by someone else.

___ 76. It is essential to find out precisely what each child is capable of doing before planning his program.

___ 77. Teachers should train themselves to systematically reinforce desirable behavior.

___ 78. Evaluation not only makes it possible to obtain information about performance, but offers opportunities for diagnosis.

___ 79. A good plan for a program for mentally handicapped children would be to select a curriculum and then set about teaching it.

___ 80. Teachers of mentally handicapped children should demonstrate considerable pity for the children.

___ 81. A lack of structure where the program offers freedom without specified objectives is a useful approach to programs for the mentally handicapped child.

___ 82. Waiting until father comes home to administer punishment is more effective than immediate punishment.

___ 83. "Don't stand on the table." would be a better direction than "Come over here and choose another toy."

___ 84. Sometimes what teachers see as punishments are actually rewards.

___ 85. What is a reward to one child might not be a reward or reinforcer to another.

___ 86. One way of eliminating bad behavior is to ignore it.

___ 87. Continuous reinforcement is best in establishing learning and partial reinforcement is best for maintaining behavior.

___ 88. Group experiences should be based on the developmental level of the lowest functioning child in the group.

___ 89. The good teacher of the mentally handicapped child has curriculum in mind at all times but works constantly attempting to follow the child's thinking by interacting in a natural, conversational manner.

___ 90. A lack of structure where the program offers freedom without specified objectives is a useful approach to programs for the mentally handicapped child.

___ 91. All teachers reward children for behavior they see as desirable. Some merely do it more systematically than others.

___ 92. A good program considers the interests and needs of parents as well as children. Positive help is provided on an individual and group basis to foster this principle.

___ 93. As a teacher in the classroom, you need to make adjustments for the brain injured child to minimize the crippling effects of the child's distractability.

___ 94. Some recent research has fully supported the fact that a brain injured child does best in a stimulating environment.

___ 95. There is great disagreement among educators concerning the profit that trainable children can derive from group learning experiences.

Instructions. Draw a circle around either a., b., c., d., or e. to indicate which is the best answer.

96. Which of the following would not be likely to retard growth in a child.
    a. glandular malfunctions
    b. poor nutrition
    c. strabismus
    d. primordial dwarfism
    e. all of the above

97. Tommy stumbled and hit his nose on a table in the classroom. He raised himself up to a standing position and you handed him a paper tissue. The nosebleed did not stop spontaneously. As a result your action(s) would include the following:
    a. let Tommy walk about to try to forget about the nosebleed.
    b. tell Tommy to be careful where he is going so he doesn't have future accidents
    c. gently grasp the lower end of Tommy's nose between thumb and index finger, pressing the nose against the side for five minutes.
    d. none of the above.
    e. all of the above.

98. Terry, one of the children, has just had a bad fall on the play yard. Her skin looks pale and clammy, with small drops of sweat particularly around the lips and forehead, she also has lost consciousness, you recognized the symptoms as shock. Your first action(s) should include:
    a. sitting Terry up in a chair
    b. keeping Terry from chilling
    c. attempting to put liquids down Terry's mouth
    d. all of the above
    e. none of the above

99. As a teacher, which of the following does not require a note being sent to the home?
    a. German measles
    b. measles
    c. ear infection
    d. scarlet fever
    e. all of the above

100. A child who has been exposed to chicken pox is most likely to exhibit the first symptoms in:
    a. 10-21 days
    b. 16-26 days
    c. 2-7 days
    d. 14-21 days
    e. 28 days

101. A child who has been exposed to mumps is most likely to exhibit the first symptoms in:
   a. 10-21 days
   b. 16-26 days
   c. 2-7 days
   d. 14-21 days
   e. 38 days

102. A child who has been exposed to measles is most likely to exhibit the first symptoms in:
   a. 10-21 days
   b. 16-26 days
   c. 2-7 days
   d. 14-21 days
   e. 28 days

103. A child who has been exposed to strep throat is mostly likely to exhibit the first symptoms in:
   a. 10-21 days
   b. 16-26 days
   c. 2-7 days
   d. 14-21 days
   e. 28 days

104. Billy, one of the children in your program, broke out with chicken pox today. His mother asked you what the restrictions and regulation for the disease were. Your answer would be:
   a. sick children should be kept at home 21 days.
   b. sick children should be kept at home 14 days.
   c. sick children should be kept at home 7 days.
   d. sick children should be kept at home 3 days.
   e. none of the above

105. If a child in your class has just suffered a fracture, you should
   a. devote yourself to the injured child and let the other children fend for themselves.
   b. keep the child quiet and accompanied by someone until his parents or the doctor takes over.
   c. follow the procedure given on his emergency card.
   d. try to diagnose and repair the damage.
   e. b and c of the above

106. If one of your children in the classroom indicates his head hurts, by verbal or non-verbal communication, you should first
   a. give him an aspirin and have him lie down.
   b. take his temperature
   c. isolate him from other children.
   d. call his parents
   e. none of the above.

107. When a child in your program has had a fall or has been struck on the head, he may suffer a concussion. After any head blow, you should watch for:
   a. initial unconsciousness
   b. fear
   c. progressive lethargy or considerable slowing down of the child's activity
   d. recurrent vomiting
   e. a,c, and d of above

108. Medical areas which a teacher should recognize as potential crises are:
   a. eye, ear, nose and throat infections.
   b. broken bones and head injuries
   c. communicable disease
   d. rashes
   e. a, b, and c of the above

109. Relaxation in your classroom can be encouraged by
   a. adults who speak and move quietly before rest time
   b. children who know the routine of preparing for rest
   c. adults who relax quietly when the child rests
   d. adults who play the children's favorite records
   e. all of the above

110. As a teacher interested in health care, you should continually observe the children for the following signs of illness
   a. flushed face--warm forehead
   b. paleness, sweating, or chilling
   c. listlessness, irritability
   d. headache, swollen glands and earache
   e. all of the above

111. It is important that there be a close coordination of school and home feeding programs to avoid necessary confusion for the child. To accomplish this, you may have to
   a. invite Johnny's mother to observe snack time
   b. send informational materials on nutrition home
   c. explain your goals for Johnny to the mother
   d. send lunch menus home
   e. all of the above

112. To develop positive food attitudes, it is important that you do not:
   a. introduce new foods slowly with well liked ones
   b. serve food in an easily handled form, keeping in mind the child's hand and chewing skills.
   c. make the child taste everything before he leaves the table
   d. adjust servings to child's appetite and allow for second servings
   e. serve new foods in an attractive form

113. Which of the following would not be a nutritionally sound mid-morning snack you could serve in your center.
   a. fruit, such as orange sections, apple wedges or peach halves
   b. raw vegetable pieces
   c. cookies and crackers
   d. milk or juice--either fruit or vegetable
   e. all of the above

114. If you provide a good nutrition program in your class positive outcomes would include:
   a. children will gain health and energy
   b. children will learn to eat and enjoy many kinds of foods
   c. children will socialize during snack time
   d. all of the above
   e. none of the above

115. Safety precautions that you should follow in your center would include:
   a. keeping toys out of the walking path
   b. cleaning up spills
   c. providing throw rugs which would cushion a fall
   d. a and b of the above
   e. all of the above

116. Which of the following is not a health practice you should encourage in your program:
   a. washing hands before and after eating and after toileting
   b. keeping objects out of mouth, eyes, nose, ears.
   c. playing only indoors to avoid colds, etc.
   d. covering mouth for coughing and sneezing
   e. using paper tissues

117. According to the law, when a mentally handicapped child enters the center, those liable for his safety are.
   a. the owners of the school
   b. the teachers
   c. the child himself
   d. the administrative staff
   e. a, b, and d of above

118. In your classroom the following equipment is needed for a good health and safety program.
   a. facial tissue
   b. first aid kit
   c. full length mirror
   d. large muscle equipment
   e. all of the above

119. Which of the following is not an essential in skill development:
   a. opportunity to learn
   b. practice
   c. guidance
   d. motivation
   e. ossification

120. Which is not a cause of delayed language development:
   a. brain injury
   b. mental retardation
   c. poor language models
   d. hearing problems
   e. being a boy

121. The method which seems most conducive to language learning is to surround the child with what has been called the sea of language. This involves:
   a. a wide variety of conversation with a chance to enter in at his own level from the beginning
   b. listening to stories
   c. having records available
   d. including puppets and other language motivating materials in the classroom.
   e. all of the above

122. Sally Ann is an attractive little seven year old girl who is moderately mentally retarded. Because of her age and retardation her parents and teachers should:
   a. push her hard to catch up with other children
   b. not make any demands of her
   c. teach her to try to do the best she can
   d. take her to a special tutor
   e. all of the above

123. Since behavior is learned, it's consequences
   a. maintain it
   b. strengthen it
   c. extinguish it
   d. enhance it
   e. all of the above

124. Behavioral objectives have three factors in common. A behavioral objective A. proves that a child interacts properly with a teacher, B. states what the learner is expected to do, C. gives a standard for achievement for acceptable performance, D. specifies in what context the desired behavior will occur.
   a. A,B,C
   b. B,C,D
   c. A,C,D
   d. all of the above
   e. none of the above

125. Young children in your classroom need opportunities for dramatic play because:
   a. their socialization is incomplete
   b. they need practice learning about their own feelings
   c. they need a socially acceptable outlet for their aggressive feelings
   d. they need to reinact everyday occurances
   e. all of the above

126. Decisions on the blocks of time for routine or sequence of events in your classroom will depend upon
   a. goals of the group
   b. special needs of the group
   c. time of day children arrive
   d. season of the year
   e. all of the above

THE DEVELOPMENT AND EARLY EDUCATION OF THE
MENTALLY HANDICAPPED CHILD

Pre-Test Part II

Name: _____ Date: _____

Center: _____Eau Claire, _____Stevens Point, _____Green Bay

Instructions: Number the following motor skills in the order that the child develops it. Put the number 1 by the easiest or most simple skill, and the number 2 by the next skill he is likely to develop, etc. End with number 12.

_____ 129. rolls over

_____ 130. lifts head

_____ 131. sits with support

_____ 132. skips

_____ 133. crawls

_____ 134. sits without support

_____ 135. pedals tricycle

_____ 136. pulls self to standing position

_____ 137. jumps in place

_____ 138. walks backwards

_____ 139. walks upstairs with alternating feet

_____ 140. walks alone

Instructions: Match the following

_____ 141.	mental retardation	a. persons who have suffered injury to brain cells through any process or event which occurs after conception.
_____ 142.	psychotic	b. mongolism
_____ 143.	brain damaged	c. condition where children exhibit erratic uncoordinated, uninhibited, uncontrolled and socially unacceptable behavior.
_____ 144.	hyperkinetic child syndrome	d. a group of chronic functional nervous disorders
_____ 145.	mildly retarded	e. lack of oxygen
_____ 146.	severely retarded	f. psychotherapy
_____ 147.	profoundly retarded	g. 'water on the brain'
_____ 148.	cerebral palsy	h. slow, wormlike, purposeless movements
_____ 149.	microcephaly	i. rapid jerky involuntary movements
_____ 150.	Down's syndrome	j. impairment of postural activity and walking
_____ 151.	epilepsy	k. type of cerebral palsy characterized by constant muscular contractions
_____ 152.	anoxia	l. severe emotional disturbance
_____ 153.	athetoid	m. small skull
_____ 154.	spastic	n. a variety of motor impairments which appear at birth or in early childhood
_____ 155.	chorea	o. sub average general intellectual functioning which originates in the developmental period and is associated with impairment in adaptive behavior
_____ 156.	ataxia	p. IQ's 70-84
		q. IQ's 55-69
		r. IQ's 40-54
		s. IQ's 25-39
		t. IQ's 0-24

Instructions: List, explain, or describe what is requested in each of the following questions.

157-160. List and explain at least 3 observation techniques used in observing or recording child behavior.

161-165. Describe a plan to get a child to stop swearing.

166-168. List three reasons why mentally handicapped children might perform poorly on IQ and other tests.

169-170. Describe what you should do if a child has a grand mae seizure.

171-175. List at least five prenatal influences which could cause mental handicaps.

176-180. Describe the value of home living materials for the child.

181-185. List 5 values a child can derive through playing with blocks.

186-190. List 5 values a child can gain through puzzles.

191-195. Describe concepts which the child may develop through the use of art materials in the classroom.

196-200. List 5 values a child gains through books.

APPENDIX D: CONSULTANT RESOURCE RECOMMENDATIONS

STEVENS POINT CONSULTANT RECOMMENDATIONS

The following are suggested resources for the Pilot Course The Development and Early Education of the Mentally Handicapped Child by the topics suggested in the course outline prepared by the Wisconsin Board of Vocational, Technical and Adult Education and the Wisconsin Department of Health and Social Services.

A. Fundamental Principles of Growth and Development

*Hurlock, Elizabeth B. Child Growth and Development. New York: McGraw Hill, 1972. $10.95

Ames, Louise Bates. Child Care and Development. New York: J.P. Lippincott, 1970. $10.00

Church, Joseph and Joseph L. Stone. Childhood and Adolescence: A Psychology of the Growing Person. New York: Random House, 1957. $9.95

Landreth, Catherine. Early Childhood: Behavior and Learning. New York: Alfred A. Knopf, 1967. $7.95

McCandless, Boyd. Children Behavior and Development. New York: Holt, Rinehart and Winston, Inc., 1967. $11.00

Mussen, Paul H. and Conger, Kagan. Child Development and Personality. New York: Harper and Row, 1969. $11.50

Smart, Mollie and Russell Smart. Children: Development and Relationships. New York: MacMillan, 1972. $8.95

1. Physical development

a. patterns and conditions controlling and affecting size

*Levine, Milton and Jean Seligman. Your Overweight Child. New York: World Publishing Company, 1970. $6.95

b. advantages and importance of routine child medical care

Wheatley, George M. Health Observations of School Children. New York: Blakiston Division - McGraw Hill, 1965. $11.80

c. health and first aid

*Shiller, Jack G., M.D. Childhood Illness. New York: Stein and Day, 1972. $7.95

Riehl, Luise C. Family Nursing and Home Care. Peoria: Charles A. Bennett Company, 1966. $6.40

American Red Cross. Red Cross Home Nursing. New York: Doubleday and Company. $1.50 (Paperback).

American Red Cross. Basic First Aid. (4 volumes) New York: Doubleday and Company. $2.95 set (Paperback).

d. nutrition

*McWilliam, Margart. Nutrition for the Growing Years. New York: John Wiley and Sons, 1967. $8.25

Leverton, Ruth. Food Becomes You. Ames: Iowa State University Press, 1965. $4.95

Martin, Ethel. Nutrition in Action. New York: Holt, Rinehart and Winston, 1971. $10.00

e. safety

*Kalt, Bryson and Ralph Bass. The Mothers Guide to Child Safety. New York: Grossett and Dunlap, Inc., 1971. $1.00 (Paperback).

Metropolitan Life Insurance Company. Your Child's Safety. Free. (Pamphlet).

Swartz, Edward M. Toys That Don't Care. Boston: Gambit, Inc., 1971. $6.95

2. Motor development

*Kephart, Newell C. and Don H. Radler. Success Through Play. New York: Harper and Row, 1960. $3.95

Bradley, William, Knoicki, G. and Ludy, C. Handbook for Teachers and Parents: Daily Sensori Motor Training Activities. Freeport, New York: Educational Activities, Inc., 1969.

Carabo, Cone Madeleine. A Motor Sensory Approach to Music. New York: MCA Music, 1969.

Chaney, C. and Kephart N. Motoric Aids to Perceptual Training. Columbus, Ohio: Charles E. Merrill, 1968. $4.50

Cherry, Clare. Creative Movement for the Developing Child. California: Fearon Publishing, 1968. $2.50

Denhoff, Eric, M.D. Cerebral Palsy - The Preschool Years: Diagnosis, Treatment and Planning. Springfield, Illinois: Charles C. Thomas, Publisher, 1967. $6.95

FILMS

Blocks...A Medium for Perceptual Learning. (#3104) University of Wisconsin, 1969. Color - 17 minutes. $6.75. Available from B.A.V.I., University of Wisconsin Extension, Madison.

3. Emotional development

D'Evelyn, Katherine. Meeting Childrens Emotional Needs. Engelwood Cliffs, New Jersey: Prentice Hall, 1957. $9.50

Donahue, George T. Teaching the Troubled Child. New York: Free Press, 1965. $6.95

*Foster, Genevieve W., Karen Dahlberg Vander Ven, et al. Child Care Work With Emotionally Disturbed Children. University of Pittsburgh Press, 1972. $8.50

Redl, Fritz and David Wineman. The Aggressive Child. New York: The Free Press, 1957. $7.95

Wineman, David and Fritz Redl. Children Who Hate. New York: Free Press, 1951. $5.95

Thomas. Aiding the Maladjusted Child. New York: McKay. 1967.

Wolf, Anna W.M. Parents Manual: A Guide to the Emotional Development of Young Children. Frederick Ungar Publisher, New York: 1962. $6.50

FILMS

Conscience of a Child (#6S0201) University of Minnesota Visual Aids Service, 2037 University Avenue, S.E., Minneapolis, Minnesota 55455

4. Social development

White House Conference. A Healthy Personality for Every Child. Washington: Health Publications Institute, 1951.

*Young, Leontine. Life Among The Giants. New York: McGraw Hill, 1966. $4.95 ($2.45 - paperback).

Chapman, A.H., M.D. The Games Children Play. New York: G.P. Putnam's Sons, 1971. $6.95.

FILMS

How Babies Learn (#6542), Available from B.A.V.I., University of Wisconsin Extension, Madison.

5. Communication

*Bangs, Tina E. Language and Learning Disorders of the Pre-Academic Child. New York: Appleton/Century/Crofts, 1968. $8.95

Engel, Rose. Language Motivation Experiences for Young Children. Van Nuys, California: DNA Publisher, 1968.

FILMS

Behavior Modification: Teaching Language to Psychotic Children. (Based on Work of Ivan Lovar- UCLA) Appleton/Century/Crofts, 1969. Color- 42 minutes. $17.50. Available from Bureau of Audio-Visual Instruction, University of Wisconsin Extension, 1327 University Avenue, Madison, Wisconsin 53706

6. Intellectual development

*Muller, Philippe. The Tasks of Childhood. New York: McGraw-Hill, 1969. $4.95

Almy, Millie Corinne. Young Children's Thinking. New York: Teachers Press, 1966. $2.75 (Paperback).

Arnold, Arnold. Teaching Your Child to Learn from Birth to School Age. Engelwood Cliffs, New Jersey: Prentice Hall, 1971. $6.95

Brittain, W.L. and Lowenfeld Viktor. Creative and Mental Growth. New York: Macmillan Company, 1970. $8.95

Getman, G.N. and Luverne, O.D. How to Develop Your Child's Intelligence. Minnesota: 1962.

Holt, John. How Children Learn. New York: Pitman Publishing Corporation, 1967. $2.25 (Paperback).

Holt, John. How Children Fail. New York: Dell Publishing Company, Inc., 1964. $.95 (Paperback).

Holt, John. What Do I Do Monday? New York: Dell Publishing Company, Inc., 1970. $2.95 (Paperback).

Wann, Kenneth. Fostering Intellectual Development in Young Children. New York: Teachers College.

a. heredity vs environment

b. testing and interpretation

c. diagnostic labels

d. terminology

B. Medical reasons causing or related to mentally handicapping conditions

1. Prenatal factors

C. Physical and mental problems associated with mentally handicapped child

Furneaux, Barbara. The Special Child. Baltimore: Penquin Publishing Company, 1970. $1.45 (Paperback).

Denhoff, Eric. Cerebral Palsy: The Preschool Years. Springfield, Illinois: Charles C. Thomas, Publisher, 1967. $6.95

II. Basic Principles of Planning and Implementing a Program for the Day to Day Education of a Mentally Handicapped Child.

*Buckler, Beatrice. Living With A Mentally Retarded Child: A Primer for Parents. New York: Hawthorn Books, Inc., 1971. $6.95

Frostig, Marianne. The Frostig Program. Chicago: Follett, 1964.

A. How to write a behavioral objective

B. How to determine what behaviors are creating problems for the child

Axline, Virginia M. Play Therapy. New York: Houghton Miffin Company, 1969. $8.25

of New York: Ballantine, 1969. $1.25 (Paperback).

C. How to develop maximum effective behavior

*Gordon, Thomas. Parent Effectiveness Training. New York: Peter Wyden Inc, 1970. $6.95

Beltz, Stephen. How to Make Johnny Want to Obey. Englewood Cliffs: Prentice Hall, 1971. $6.95

Browning, Robert. Behavior Modification in Child Treatment: An Experimental and Clinical Approach. Chicago: Aldine Publishing Company, 1971. $12.95

Dodson, Fitzhugh. How to Parent. Los Angeles: Nash Publishing, 1970. $2.45 (Paperback).

Krumboltz, John and Helen B. Krumboltz. Changing Children's Behavior. Engelwood Cliffs, New Jersey: Prentice Hall, Inc., 1972. $4.95 (Paperback).

Ricci, Donald P. A Training Handbook for Moderate Retarded Children In Self-Help Skills. Publication Order Service: Madison, Wisconsin.

FILMS

Behavior Modification in the Classroom. University of California, 1970. Color - 22 minutes. $8.25. Available from B.A.V.I., University of Wisconsin Extension, 1327 University Avenue, Madison, Wisconsin 54706

EAU CLAIRE CONSULTANT RECOMMENDATIONS

The following are suggested resources for the Pilot Course, The Development and Early Education of the Mentally Handicapped Child by the topics suggested in the course outline prepared by the Wisconsin Board of Vocational, Technical and Adult Education and the Wisconsin Department of Health and Social Services.

A. Fundamental Principles of Growth and Development

-Covered by Marie Evans

Solnit, Albert J., Modern Perspectives in Child Development, Yale University Press: 1963, $12.50.

Bruner, J.S., Studies in Cognitive Growth, Wiley: 1967, $7.95

1. Physical development

*-What to Expect from the Preschool Child, (Enclosure #2)

Levinson, A., Mental Retardation in Infants and Children, Yearbook Pub., 1960, $8.00

a. patterns and conditions controlling and affecting size

Hunter, M., The Retarded Child from Birth to Five, John Day, 1972, $10.00.

b. advantages and importance of routine child medical care

-This area was covered by Mrs. August Hanson, R.N. from Chippewa Falls Health Dept.

c. health and first aid

-This area was covered by Mrs. August Hanson, R.N. from the Chippewa Falls Health Dept.

*-Movie: Epilepsy - Wisconsin Epilepsy League

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*Used in the 1972-73 class year

d. Nutrition

-This area was covered by Mrs. Augusta Hanson, R.N. from the Chippewa Falls Health Dept.

e. safety

-This area was covered by Mrs. Augusta Hanson, R.N. from the Chippewa Falls Health Dept.

2. Motor Development

Martinson, R., The Abilities of Young Children, Council for Exceptional Children, 1967, $2.50.

Roach, E.G., Purdue Perceptual Motor Survey, Merrill, 1966, $3.95.

Sluckin, W., Imprinting and Early Learning, Aldine Pub. Co., 1965.

Ismail/Hafet, Intergrated Development Motor Aptitudes and Intellectual Perf, Merrill, 1968, $4.95.

3. Emotional development

Dinkmeyer, Don C., Child Development: The Emerging Self, Prentice-Hall, 1965, $7.95.

*-What to Expect from the Preschool Child, (enclosure #3)

Brackbill, Yvonne, Research in Infant Behavior, William and Wilkins, 1964, $6.25.

4. Social development

Flavel, John H., The Developmental Psychology of Jean Piaget, Van-Nostrand, 1963, $9.50.

*-What to Expect from the Preschool Child, (enclosure #4)

Leeper, Sarah, Good School for Young Children: Guide for 3-5 year old Child, Macmillian, 1968, $7.95.

5. Communication

*Yoder, David, Communication Training Program for Severely Retarded Children, Mimeographed Material (enclosures #6 and #7)

*Gordon, M., Helping the Trainable Mentally Retarded Child Develop Speech and Language, CC Thomas, 1972, $4.95.

Schiefelbush, R.L., et al., Language and Mental Retardation, Holt, Rinehart, and Winston, 1967, $6.00.

Lillywhite, H., Communication Problems in Mental Retardation: Diagnosis and Management. Harper, 1969, $8.95.

Chamberlain, N., Speech Readiness Guide for Parents of the Mentally Retarded, Olmay Books, 1956, $7.95.

Molloy, J.S., Teaching the Retarded to Talk, John Day, 1961, $4.95.

Webb, Clarence and Rinde, Stewert, Speech, Language, and Hearing of the Mentally Retarded, in Mental Retardation, Edited by Baumeister, A, Aldine Pub. Co., 1967, $12.50.

6. Intellectual development

Ginsberg, Herbert and Opper, Sylvia, Piaget's Theory of Intellectual Development: An Introduction, Prentice Hall, 1969, $4.55.

*-What to Expect of the Preschool, (enclosure #5)

Almy, Millie Corinne, Young Children's Thinking: Studies of Some Aspects of Piaget's Theory, N.Y. Teachers College Press, Columbia University, 1966.

a. heredity vs. environment

Allen, Arnold, et al., The Role of Genetics in Mental Retardation, University of Miami Press, 1971, $6.95.

Movie-"Laws of Heredity", 15 min., BAVE, 1963.

b. testing and interpretation

Hutt, S.J. and Hutt, C., Direct Observation and Measurement of Behavior, C.C. Thomas, 1970.

c. diagnostic labels

*Carter, C.H., Handbook of Mental Retardation Syndrome, 2nd Edition, C.C. Thomas, 1970, $8.00.

*Smith, Robert, Teacher Diagnosis of Educational Difficulties, Merrill, 1969, $5.95.

Taylor, E.M., Psychological Appraisal of Children with Cerebral Defects, Harvard University Press, 1959.

d. terminology

*Grossman, H.J., Manual on Terminology and Classification in Mental Retardation, AAMD, 1973, $5.00.

B. Medical reasons causing or related to mentally handicapping conditions

*Carter, C.H., Handbook of Mental Retardation Syndromes, 2nd edition, C.C. Thomas, 1970, $8.00.

*Grossman, H.J., et al., Manual on Terminology and Classification in Mental Retardation, 1973 revision, AAMD, $5.00.

1. Prenatal factors

Movie- Heredity and Prenatal Development, 21 min, UW-EC.

C. Physical and mental problems associated with the mentally handicapped child

Smith, R.M., An Introduction to Mental Retardation, McGraw-Hill, 1971, $8.95.

Ehlers, W.H., An Introduction to Mental Retardation: A Programmed Text, Merrill, 1973, $8.00.

MOVIES:

*Moderate Retardation in Young Children, 42 min., $4.75, BAVI, 1965.

3 years Later: Developmental Study of Retarded Growth and Development. 38 min. $5.25. BAVI, 1966.

Nature of Mental Retardation. $2.50. 25 min. BVI Kansas.

II. Basic Principles of Planning and Implementing a Program for the Day to Day Education of a Mentally Handicapped Child.

*Becker, Wesley C., Parents are Teachers, Research Press, 1971, $2.50.

*Watson, Luke, Mimeographed material on Training and Shaping, enclosure #1.

Patterson, G., Living with Children, Research Press, 1971, $3.50.

Smith, Michael, Management of the Handicapped Child, Grune and Stratton, 1957.

A. How to write a behavioral objective

*Popham, and Baker, Systematic Instruction, Prentice-Hall, 1970, $4.50.

*Mager, R.F., Preparing Instructional Objectives, Fearon, 1962, $3.00.

Mager, R.F., Developing Attitude Toward Learning, Fearon, 1968, $2.00

B. How to determine what behaviors are creating problems for the child.

DiNola, Alfred, T.M.R. Performance Profile. Educational Performance Associates, 1970.

American Association on Mental Deficiency (AAMD), Scales of Adaptive Behavior, AAMD.

Central Wisconsin Scales of Adaptive Behavior, Central Wisconsin Colony.

C. How to develop maximum effective behavior

*Becker, W., Parents are Teachers, Research Press, 1971, $3.50.

*Bensberg, Gerard. Teaching the Mentally Retarded, Southern Regional Education Board, 1965, $4.50.

Whaley, D.L. and Malott, R., Elementary Principles of Behavior, Appleton-Century-Crofts, 1971, $8.95.

Ramp, Eugene and Hopkins, Bill, A New Direction for Education: Behavior Analysis, University of Kansas, 1971, $3.50.

Thompson, Travis, Behavior Modification of the Mentally Retarded. Oxford Univ. Press, 1972, $7.50.

Sulzer, Beth and Mayer G., Behavior Modification Procedures for School Personnel, Dryden Press, 1972, $5.50.

*Teaching Concepts-Mimeographed material, (enclosure #9)

MOVIES

*Behavior Modification in the Classroom, 22 min., $8.25, BAVI, 1971.

*Rewards and Reinforcements, 26 min., $5.00, BAVI, 1970.

*Teaching the Mentally Retarded, A Positive Approach, 22 min., $2.00, BAVI, 1966.

Operation Behavior Modification, 37 min. $2.50, BVI Kansas.

GREEN BAY CONSULTANT RECOMMENDATIONS

The following are suggested resources for the Pilot Course The Development and Early Education of the Mentally Handicapped Child by the topics suggested in the course outline prepared by the Wisconsin Board of Vocational, Technical and Adult Education and the Wisconsin Department of Health and Social Services.

A. Fundamental Principles of Growth and Development

*Child Development (Fourth Edition) by Elizabeth B. Hurlock, Ph.D., McGraw-Hill Book Company, New York, New York Chapter I (page 1-30) and Chapter 4 (pages 111-159)

1. Physical development

Better Homes and Gardens Baby Book, Bantam Book, The Meredith Corporation, 1716 Locust Street, Des Moines, Iowa 50303. Price: $1.00

Baby and Child Care by Dr. Benjamin Spock. Pocket Books, Simon & Schuster Inc., 1 West 39th Street, New York, N.Y. 10018. Price: 95¢

a. patterns and conditions controlling and affecting size

(covered in * "most preferred" above)

b. advantages and importance of routine child medical care

Parents Be Wise-Immunize
Dental Health for the Pre-school Child
Common Communicable Disease Wall Chart
(Free leaflets from the Division of Health -- Wisconsin Dept. of Health and Social Services, Box 309, Madison, Wisconsin.)

c. health and first aid

Emergency Care Procedures for Wisconsin Schools - Wisconsin Division of Health, P.O. Box 309, Madison, Wisconsin 53701 (Free)

d. nutrition

Food for School Girls and Boys - Wisconsin State Board of Health, P.O. Box 309, Madison, Wisconsin 53701 (Free)

e. safety

Child Safety Booklet - Metropolitan Life Insurance Co., New York, N.Y. (Free)

2. Motor development

*Child Development by Hurlock, Chapter 5 (Pages 166-204)

Child Development (A Study of Growth Processes) edited by Stewart Cohen, F. E. Peacock Publishers Inc., Itasca, Illinois. Price: $5.95 (Pages 8-14; pages 114-116)

A Guest Lecture by a Physical Therapist or Pediatrician in the area.

3. Emotional development

*Child Development (Fourth Edition) by Hurlock, Chapter 7 (Pages 260-318) and Chapter 12 (Pages 543-587)

Child Development (A Study of Growth Processes) Edited by Steward Cohen, Sections I, II, and III (Pages 1-99)

4. Social development

*Child Development (Fourth Edition) by Hurlock, Chapters 8, 9, and 10 (Pages 325-482)

Child Development (A Study of Growth Processes) Edited by Steward Cohen, Sections VIII, IX, and X (Pages 283-422)

5. Communication

*Child Development (Fourth Edition) by Hurlock, Chapter 6 (Pages 208-255)

Child Development (A Study of Growth Processes) Edited by Stewart Cohen, Section VII (Pages 251-282)

6. Intellectual development

*Child Development (Fourth Edition) by Hurlock, Chapter 11 (Pages 488-535)

Child Development (A Study of Growth Processes)
Edited by Stewart Conen, Sections IV, V and VI
(Pages 111-282)

B. Medical reasons causing or related to mentally handicapping conditions

*Child Development (Fourth Edition) by Hurlock, Chapter 2 (Pages 57-72)

Film: Mental Retardation (Reel I and II) Bureau for the Mentally Handicapped, Madison, Wisconsin, (Free to use)

1. Prenatal factors

(These are covered in both of the above)

C. Physical and mental problems associated with the mentally handicapped child

*The Retarded Child Gets Ready for School by Margaret Hill, Public Affairs Pamphlet No. 349, 381 Park Avenue South, New York 10016. 25¢

Day Care: Serving Children With Special Needs, U.S. Department of Health, Education, and Welfare - Office of Child Development, 1972.

II. Basic Principles of Planning and Implementing a Program for the Day to Day Education of a Mentally Handicapped Child.

A. How to write a behavioral objective

Preparing Instructional Objectives by Robert F. Mager, Fearon Publishers, Pala Alto, California, entire book 60 pages. $1.75

B. How to determine what behaviors are creating problems for the child

Teaching: A Course in Applied Psychology by Wesley C. Becker, Siegfried Engelmann, and Don R. Thomas, Science Research Associates, Inc., Chicago, Illinois, pages 1-224 and 237-261.

C. How to develop maximum effective behavior

Teaching: A Course in Applied Psychology by Wesley C. Becker, Siegfried Engelmann, and Don R. Thomas, Science Research Associates, Inc., Chicago, Illinois, pages 1-224 and 237-261.

I would:

1.) Eliminate the teaching of behavioral objectives.

2.) Teach the students how to write out very individualized programs that tell what a person should say, when to reinforce, etc.

3.) Teach operations and concepts - what they are and how they can be used to teach kids.

4.) Include reinforcement, punishers, extinction, when to reinforce and how to, various kinds of reinforcers, shaping, teaching self-confidence and esteem, handling of conduct problems, making teaching fun, and general group management techniques.